

CLAIMS ONLY						Application Number <i>10-653996</i>	Filing Date		
						Applicant(s)			
						May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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49									
50									
Total Indep	5								
Total Depend	21								
Total Claims	26								